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**Declaration and Power of Attorney Patent Application
(Design or Utility)**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: 'Method and apparatus for determining autofluorescence of skin tissue'

the specification of which

- ☐ is attached hereto
- x was filed on March 29, 2002 as application serial no. 10/089,575
and or PCT International Application number PCT/NL99/00607 and was amended
on (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information know to me to be material to patentability as defined in 37 C.F.R. §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or 35 U.S.C. §365(b) of any foreign application(s) for patent or inventor's certificate, or 35 U.S.C. §365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below any foreign application for patent or inventor's certificate of PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)		
Number	Country	Day/Month/Year Filed
Number	Country	Day/Month/Year Filed
Number	Country	Day/Month/Year Filed

I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below:

Prior Provisional Application(s)	
Serial Number	Day/Month/Year Filing Date
Serial Number	Day/Month/Year Filing Date
Serial Number	Day/Month/Year Filing Date

I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s), or under 35 U.S.C. §365(c) of any PCT International application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose to the U.S. Patent and Trademark Office all information known to me to be material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application:

Prior U.S. or International Application(s)		
Serial Number	Day/Month/Year Filed	Status (patented, pending, abandoned)
Serial Number	Day/Month/Year Filed	Status (patented, pending, abandoned)
Serial Number	Day/Month/Year Filed	Status (patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Power of Attorney


As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.


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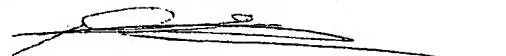
I hereby authorize them or others whom they may appoint to act and rely on instructions from and communicate directly with the person/organization who/which first sends this case to them and by whom/which I hereby declare that I have consented after full disclosure to be represented unless/until I instructed otherwise.


Please direct all correspondence in this case to at the address indicated below:

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